

Amendment No. \_\_\_\_\_

  
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Signature of Sponsor

**FILED**

Date \_\_\_\_\_

Time \_\_\_\_\_

Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

**AMEND Senate Bill No. 2622**

**House Bill No. 2664\***

by deleting all language after the enacting clause and substituting instead the following:

SECTION 1. Tennessee Code Annotated, Section 7-53-101, is amended by inserting the following language as a new, appropriately designated subdivision:

( ) "Retail business" means a retail establishment providing general retail sales or services to consumers;

SECTION 2. Tennessee Code Annotated, Section 7-53-305, is amended by adding the following new subsections:

(i)

(1) An industrial development corporation may negotiate a payment in lieu of tax agreement for less than the ad valorem taxes otherwise due for a retail business for a period longer than ten (10) years, plus a reasonable construction or installation period not to exceed three (3) years, if:

(A) The corporation is a joint industrial development corporation with representation of all affected taxing jurisdictions within the county;

(B) The corporation has entered into an interlocal agreement with other taxing jurisdictions to establish criteria for any payment in lieu of tax agreements that might affect shared tax bases;

(C) The corporation has received written approval from each affected local governmental entity. As used in this subdivision (i)(1)(C), "affected local governmental entity" means a county or local special school district which will suffer an actual loss of tax revenue under a payment in lieu of tax agreement; or



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(D) The corporation pays the other affected local governments the amount of ad valorem taxes those governments would otherwise receive for the affected property based on its assessed value after the initial ten (10) years of the agreement.

(2) The requirements under this subsection (i) shall not apply to payment in lieu of tax agreements affecting only the municipality that created the corporation and the beneficiary making the agreement.

(3) This subsection (i) does not apply in any county having a population of not less than nine hundred thousand (900,000), according to the 2010 or any subsequent federal census.

(j) Before an industrial development corporation approves a payment in lieu of tax agreement, the corporation shall hold a public meeting relating to the proposed agreement after notice is provided by the corporation or governing body, as may be required by law, at least five (5) days prior to the date of such public meeting. Such notice must include the time, place, and purpose of the public meeting.

SECTION 3. This act shall take effect upon becoming a law, the public welfare requiring

it.

Amendment No. \_\_\_\_\_

*Harrell*

Signature of Sponsor

FILED

Date \_\_\_\_\_

Time \_\_\_\_\_

Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

AMEND Senate Bill No. 2693

House Bill No. 1521\*

by inserting the following new sections immediately preceding the penultimate section and renumbering the subsequent sections accordingly:

SECTION \_\_. Tennessee Code Annotated, Section 55-4-202(c)(7), is amended by adding the following as a new, appropriately designated subdivision:

( ) Louisiana State University;

SECTION \_\_. Tennessee Code Annotated, Title 55, Chapter 4, Part 2, is amended by adding the following as a new section:

(a) An owner or lessee of a motor vehicle who is a resident of this state, upon complying with state motor vehicle laws relating to registration and licensing of motor vehicles and paying the regular fee applicable to the motor vehicle and the fee provided for in § 55-4-203, shall be issued a Louisiana State University new specialty earmarked license plate for a motor vehicle authorized by § 55-4-210(c).

(b) The new specialty earmarked license plates provided for in this section shall bear the official colors and logo of the Louisiana State University. The design of the plates shall be approved by Louisiana State University prior to production, and shall additionally afford the trademark protection as Louisiana State University shall require as otherwise permitted by law. All uses of the colors and logo of Louisiana State University shall inure to the benefit of Louisiana State University.

(c) In accordance with § 55-4-215, the funds produced from the sale of Louisiana State University new specialty earmarked license plates shall be allocated to the Louisiana State University Alumni Association. The funds shall be used exclusively



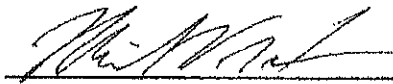
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to support academic enrichment for students, including scholarships and educational opportunities for students from Tennessee.

Amendment No. \_\_\_\_\_



Signature of Sponsor

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Date \_\_\_\_\_

Time \_\_\_\_\_

Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

AMEND Senate Bill No. 132

House Bill No. 41\*

by deleting the amendatory language "on June 1 following the end of the tax year" from Section 1(a)(1) and substituting instead the language "on June 1 of each tax year".



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Amendment No. \_\_\_\_\_

  
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Signature of Sponsor

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Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

**AMEND Senate Bill No. 205\***

**House Bill No. 1034**

by deleting the amendatory language "on June 1 following the end of the tax year" from Section 1(a)(1) and substituting instead the language "on June 1 of each tax year".



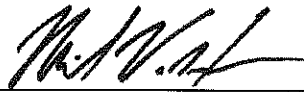
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Amendment No. \_\_\_\_\_



Signature of Sponsor

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Date \_\_\_\_\_

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Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

**AMEND Senate Bill No. 2059\***

**House Bill No. 2129**

by deleting all language after the caption and substituting instead the following:

WHEREAS, the safety of our children is paramount; and

WHEREAS, reducing the armed response time of law enforcement officers for reports of armed intruders on school premises is vital to ensuring the safety of children, teachers, and school personnel; and

WHEREAS, increasing the presence of properly trained, armed, and certified officials on school premises will aid in protecting our children, teachers, and school personnel; and

WHEREAS, the presence of armed school security officers will help to comfort parents, children, and citizens of this State concerned for the safety of those present on school premises; now, therefore,

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. This act shall be known and may be cited as the "School Safety Act of 2018."

SECTION 2. Tennessee Code Annotated, Section 39-17-1309(e)(10), is amended by deleting the language "pursuant to § 49-6-815 or § 49-6-816" and substituting instead the language "pursuant to § 49-6-809, § 49-6-815, or § 49-6-816".

SECTION 3. Tennessee Code Annotated, Title 49, Chapter 6, Part 8, is amended by adding the following as a new section:

**49-6-809.**

(a) For purposes of this section, "law enforcement officer" means the sheriff, sheriff's deputies, or any police officer employed by the state, a municipality, county, or political subdivision of the state certified by the peace officer standards and training



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(POST) commission; any commissioned member of the Tennessee highway patrol; and any Tennessee county constable authorized to carry a firearm and who has been certified by the POST commission.

(b)

(1) To increase the protection and safety of students and school personnel, local boards of education may adopt a policy authorizing off-duty law enforcement officers to serve as armed school security officers during regular school hours when children are present on the school's premises, as well as during school-sponsored events.

(2) An LEA that authorizes armed school security officers pursuant to this section shall not authorize more than two (2) armed school security officers per school day to work during the hours that children are present on school premises, and shall not authorize more than two (2) armed school security officers per school day to work during school-sponsored events occurring outside of regular school hours.

(3) Each LEA authorizing armed school security officers pursuant to this section shall maintain a record of the hours served by an armed school security officer for a school within the LEA during regular school hours when children are present on the school's premises, as well as a record of the hours served by an armed school security officer during school-sponsored events occurring outside of regular school hours.

(c)

(1) If a local board of education adopts a policy authorizing off-duty law enforcement officers to serve as armed school security officers, the LEA shall enter into a memorandum of understanding (MOU) with each law enforcement agency that employs the law enforcement officers selected by the chief law enforcement officer of the law enforcement agency to serve as armed school security officers.



(2) Any MOU entered into pursuant to subdivision (c)(1) shall contain the following:

(A) A provision that prescribes the types of firearms that may be carried by an armed school security officer on school premises and the manner in which the armed school security officer's firearm may be carried; provided, that the MOU shall not prohibit an off-duty law enforcement officer who is serving as an armed school security officer from carrying a loaded handgun on school premises;

(B) A provision limiting the role of armed school security officers to that of maintaining safety in the school and prohibiting armed school security officers from addressing routine school discipline issues that do not constitute crimes or that do not impact the immediate health or safety of the students or staff of the school;

(C) Provisions stipulating that off-duty officers serving as armed school security officers are required to follow the policies of the officer's employing law enforcement agency;

(D) Procedures for communication among the LEA, armed school security officers, school resource officers, and local law enforcement agencies;

(E) A description of any policies, procedures, or other requirements that the armed school security officers must follow when responding to an emergency on school grounds;

(F) A statement requiring that armed school security officers comply with all state and federal laws regarding the confidentiality of personally identifiable student information;

(G) Procedures for addressing complaints against armed school security officers;

(H) A provision detailing how liability will be provided for any acts or omissions of the armed school security officer within the scope of the armed school security officer's duties, except for willful, malicious, or criminal acts or omissions or for acts or omissions done for personal gain;

(I) A provision detailing how scheduling will be determined; and

(J) The hours and wages of each armed school security officer assigned to a school in the LEA. Notwithstanding the federal Fair Labor Standards Act, the hourly wage for armed school security officers shall not be less than ten dollars (\$10) per hour.

(3) Any MOU entered into pursuant to subdivision (c)(1) may prescribe whether an armed school security officer is required to be uniformed on school premises.

(4)

(A) If an MOU entered into pursuant to this subsection (c) would permit law enforcement officers to serve as armed school security officers at a school that is located within the jurisdictional boundaries of another law enforcement agency that is not the law enforcement officers' employing agency, then the MOU shall not take effect until approved by the chief law enforcement officer of the law enforcement agency with law enforcement jurisdiction for the school.

(B) Notwithstanding title 6, chapter 54, part 3, or any other law to the contrary, a law enforcement officer who is serving as an armed school security officer pursuant to this section for a school located outside of the jurisdictional boundaries of the officer's employing agency shall, while acting within the scope of the officer's employment as an armed school security officer, have the jurisdiction and authority to enforce all laws of this state and of the county or municipality in which the school at which the officer is serving as an armed school security officer is located.

(d) Nothing in this section requires a local board of education to adopt a policy permitting an off-duty law enforcement officer to serve as an armed school security officer on school premises.

(e)

(1) The chief law enforcement officer of each law enforcement agency in this state shall prepare and distribute a list of its law enforcement officers who the chief law enforcement officer deems qualified and who are interested in serving as armed school security officers pursuant to this section to each LEA that is located within the law enforcement agency's jurisdictional boundaries and with which a MOU has been entered into in accordance with the provisions of this section. The chief law enforcement officer shall consider the federal Fair Labor Standards Act when considering an officer's qualification to serve as an armed school security officer.

(2) The chief law enforcement officer of a law enforcement agency may prohibit a law enforcement officer employed by another law enforcement agency from serving as an armed school security officer at a school located within the chief law enforcement officer's jurisdiction for reasons the chief law enforcement officer deems sufficient, including, but not limited to, if the law enforcement officer has received a disciplinary action within the last five (5) years that resulted in, at a minimum, a written reprimand. The chief law enforcement officer shall notify any such officer the chief prohibits from serving as an armed school security officer by sending a written notice of the prohibition to the law enforcement officer and the law enforcement officer's employing agency. The law enforcement officer is entitled to compensation pursuant to this section for any service as an armed school security officer performed by the officer prior to receipt of the written notice by the earlier of the law enforcement officer or the law enforcement officer's employing agency.

(f)

(1) Payments to armed school security officers shall be made from the general fund, subject to the appropriation of moneys within the general fund.

(2) Funding for armed school security officers may come from the Tennessee school safety center grant under § 49-6-4302. Nothing in this section prohibits an LEA from compensating, from other appropriate state, local, or federal funds received by the LEA, an armed school security officer in excess of any Tennessee school safety center grant funds received.

(g) The use of armed school security officers shall be supplemental to school resource officers and school safety measures adopted by an LEA and shall not supplant school resource officers or other school security measures. An LEA shall not replace a school resource officer or other school security measure with an armed school security officer. A law enforcement agency shall not terminate a MOU based solely upon an LEA's adoption of a policy authorizing the use of armed school security officers.

(h) Following the conclusion of the 2020-2021 school year, the chief law enforcement officer of each law enforcement agency with law enforcement jurisdiction for a school that has utilized armed school security officers pursuant to this section shall submit a report to the governor, the chair of the education administration and planning committee of the house of representatives, the chair of the education committee of the senate, and the commissioner of education on or before September 1, 2021, that details any school security deficiencies and provides recommendations for security improvements for each such school. If the report requirement of this subsection (h) affects more than one (1) law enforcement agency within any one (1) county, then the affected chief law enforcement officers shall submit a single, consolidated report covering the schools that have utilized armed school security officers pursuant to this section.

SECTION 4. Tennessee Code Annotated, Section 49-6-4302(c)(1), is amended by deleting the subdivision and substituting instead the following:

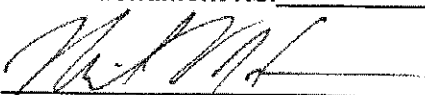
(c)

(1) The Tennessee school safety center, within the limit of appropriations for the center, may establish grants to LEAs for the development of improved school security, including school resource officers and armed school security officers, innovative violence prevention programs, conflict resolution, disruptive or assaultive behavior management, peer mediation, and training for employees on the identification of possible perpetrators of school-related violence.

SECTION 5. The state board of education is authorized to promulgate rules to effectuate the purposes of this act. All rules must be promulgated in accordance with title 4, chapter 5.

SECTION 6. This act is repealed effective July 1, 2022.

SECTION 7. This act shall take effect upon becoming a law, the public welfare requiring it.

Amendment No. \_\_\_\_\_  
  
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Signature of Sponsor

<b>FILED</b>
Date _____
Time _____
Clerk _____
Comm. Arndt. _____

**AMEND Senate Bill No. 2051\***

**House Bill No. 2132**

by deleting the effective date section and substituting instead the following:

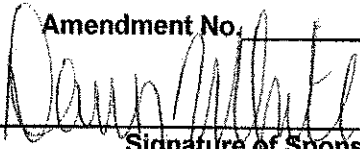
SECTION \_\_. This act shall take effect October 1, 2018, the public welfare  
requiring it, and shall apply to tax returns filed on or after October 1, 2018.



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Amendment No. \_\_\_\_\_  
  
Signature of Sponsor

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Date _____
Time _____
Clerk _____
Comm. Amdt. _____

**AMEND Senate Bill No. 2609**

**House Bill No. 2550\***

by deleting all language after the enacting clause and substituting instead the following:

SECTION 1. Tennessee Code Annotated, Title 49, Chapter 6, Part 10, is amended by adding the following language as a new section:

An LEA may offer a noncompulsory gun safety class or program for students in elementary school. If an LEA offers a gun safety class or program, then the LEA may incorporate, in the class or program, the rules and principles of gun safety developed by an organization specializing in firearms training and safety that the local board of education finds appropriate to incorporate. The course of instruction shall not permit the use or presence of live ammunition or live fire.

SECTION 2. This act shall take effect upon becoming a law, the public welfare requiring it.



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Amendment No. \_\_\_\_\_

  
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Signature of Sponsor

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Comm. Amdt.	_____

**AMEND Senate Bill No. 2266\***

**House Bill No. 2531**

by deleting all language after the enacting clause and substituting instead the following:

SECTION 1. Tennessee Code Annotated, Section 67-6-384, is amended by adding the following as a new subsection:

(c) Any entity that qualifies for a tax exemption under this section shall not be eligible for a sales and use tax exemption with regard to any industrial machinery that is used in the operation of a qualified data center or used primarily for research and development.

SECTION 2. This act shall take effect upon becoming a law, the public welfare requiring it.



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Amendment No. \_\_\_\_\_

*Karen H. Camper*

Signature of Sponsor

FILED

Date \_\_\_\_\_

Time \_\_\_\_\_

Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

AMEND Senate Bill No. 1277

House Bill No. 1345\*

by deleting all language after the enacting clause and substituting instead the following:

SECTION 1.

(a) As used in this act:

(1) "Accessorial services":

(A) Means any service that is incidental to transportation services;

and

(B) Includes storage, packing, unpacking, hoisting or lowering, waiting time, overtime loading and unloading, and reweighing;

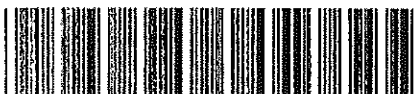
(2) "Best interests of the state" means a determination by the commissioner, with approval by the commissioner of economic and community development, that the qualified transportation expenditures are a result of the credit described in this act;

(3) "Freight motor vehicle" means a motor vehicle that is designed and used primarily to transport goods for hire or for commercial purposes;

(4) "Goods" means personal property that is treated as movable for the purposes of a contract for transportation services;

(5) "Line haul services" means the movement of goods over the public highways from the point of origination to the final destination;

(6) "Motor carrier" means a person who operates or causes to be operated a freight motor vehicle on a public highway for the purpose of performing transportation services;



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(7) "Person" means every individual, firm, association, joint-stock company, syndicate, partnership, corporation, or other business entity;

(8) "Qualified transportation expenditures" means the total charges incurred by a shipper for line haul services, transportation services, and accessorial services performed by a motor carrier for shipments picked up at points of origination within this state or delivered to final destinations within this state;

(9) "Shipper" means any person that enters into a contract for transportation services with a motor carrier;

(10) "Transportation services" means the pickup or delivery, or both, of goods at the point of origination or final destination; and

(11) "Turn-around policy" means the uniform and internal policy established by a shipper that meets the requirements of subdivision (c)(2).

(b) The Tennessee advisory commission on intergovernmental relations (TACIR) is directed to perform a study of the potential, overall effects of creating a franchise and excise tax credit for shippers with pickups or deliveries originating in, or destined to, any county having a population over nine hundred thousand (900,000) according to the 2010 federal census or any subsequent federal census.

(c) In conducting the study under subsection (b), TACIR shall consider a franchise and excise tax credit that meets the following criteria:

(1) The credit would be allowed to any shipper that establishes and implements a turn-around policy pursuant to subdivision (c)(2) against the sum total of the franchise and excise taxes owed by the shipper, equal to two percent (2%) of qualified transportation expenditures;

(2) To qualify for the credit described in this act, the shipper would establish and implement a uniform and internal turn-around policy for assuring that pickups and deliveries are performed during the period of time agreed upon

by a motor carrier and a shipper and for preventing delays in the timely transportation of goods over the public highways. The policy must include the following minimum requirements:

(A) That pickups and deliveries shall be accomplished on the date scheduled for pickup or delivery, that pickups must be completed within the period of time agreed to by the shipper and the motor carrier, which period shall not exceed two (2) hours, and that deliveries must be completed within the period of time agreed to by the shipper and the motor carrier, which period shall not exceed two (2) hours; and

(B) That for each shipment of goods for which transportation services of the motor carrier is requested by a shipper, the shipper shall provide the motor carrier with contact information for:

(i) Any person who may authorize pickup or delivery of any goods to be transported if the shipper designates such a person;

(ii) The shipper and any person receiving the pickup or delivery, if different from the shipper; and

(iii) Any person to whom notification of delays or that goods are available for pickup or delivery, shall be given;

(3) The credit would only be available upon a determination by the commissioner of revenue, with approval by the commissioner of economic and community development, that the qualified transportation expenditures and the credit are in the best interests of the state;

(4) The credit would apply only in the tax year in which the shipper implements a turn-around policy meeting the criteria in subdivision (c)(2), incurs qualified transportation expenditures, and otherwise meets the requirements of this act; and

(5) The total credit claimed for any taxable year, including the amount of any carryforward credit claimed, would not exceed fifty percent (50%) of the combined franchise and excise tax liability shown by the return before any credit is taken. Any unused credit could be carried forward in any tax period until the credit is taken; provided, however, that the credit could not be carried forward for more than fifteen (15) years.

(d) All appropriate state agencies and departments shall provide assistance to TACIR upon the request of its executive director.

(e) TACIR shall submit a report disclosing the findings of the study and recommendations, including any proposed legislation or interim reports, to the general assembly no later than February 1, 2019.

SECTION 2. This act shall take effect upon becoming a law, the public welfare requiring

it.

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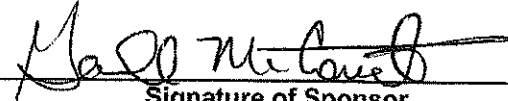
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Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

Amendment No. \_\_\_\_\_

  
Signature of Sponsor

**AMEND Senate Bill No. 2165\***

**House Bill No. 2355**

by deleting all language after the enacting clause and substituting instead the following:

SECTION 1. Tennessee Code Annotated, Section 56-7-2360, is amended by deleting the section and substituting the following:

(a)

(1) As used in this section, unless the context otherwise requires:

(A) "Aggregate lifetime limit" means a dollar limitation on the total amount that may be paid for benefits under a health plan with respect to an individual or other coverage unit;

(B) "Annual limit" means a dollar limitation on the total amount that may be paid for benefits in a twelve-month period under a health plan with respect to an individual or other coverage unit;

(C) "Classification of benefits" means inpatient in-network benefits, inpatient out-of-network benefits, outpatient in-network benefits, outpatient out-of-network benefits, prescription drug benefits, and emergency care benefits. These classifications of benefits are the only classifications that may be used except that there may be sub-classifications within both outpatient classifications differentiating office visits from other outpatient items and services, including outpatient surgery, facility charges for day treatment centers, laboratory charges, and other medical items;

(D) "Financial requirement" includes deductibles, copayments,



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coinsurance, and out-of-pocket expenses, but excludes an aggregate lifetime limit and an annual limit;

(E) "Health benefit plan" means any hospital or medical expense policy, health, hospital, or medical service corporation contract, a policy or agreement entered into by a health insurer or a health maintenance organization contract offered by an employer, other plans administered by the state government, or any certificate issued under the policies, contracts, or plans;

(F) "Health insurance carrier" means any entity subject to the insurance laws and regulations of this state, or subject to the jurisdiction of the commissioner of commerce and insurance, that contracts with healthcare providers in connection with a plan of health insurance, health benefits, or health services;

(G) "Mental health or alcoholism or drug dependency benefits" means benefits for the treatment of any condition or disorder that involves a mental health condition or substance use disorder that falls under any of the diagnostic categories listed in the mental disorders section of the current edition of the International Classification of Disease or that is listed in the mental disorders section of the most recent version of the Diagnostic and Statistical Manual of Mental Disorders;

(H) "Non-quantitative treatment limitations," or "NQTLs," are limitations that are not expressed numerically, but otherwise limit the scope or duration of benefits for treatment. For purposes of this subdivision (a)(1)(H), fail-first or step therapy protocols do not include formulary designs that require the prescription, use, and a showing of ineffectiveness of generic drugs prior to approval of payment for the prescription of higher cost drugs. NQTLs include, but are not limited to:

(i) Medical management standards limiting or excluding benefits based on medical necessity or medical appropriateness, or based on whether the treatment is experimental or investigative;

(ii) Formulary design for prescription drugs;

(iii) Tier design for plans with multiple network tiers, including preferred providers and participating providers, and network tier design;

(iv) Standards for provider admission to participate in a network, including reimbursement rates;

(v) Plan methods for determining usual, customary, and reasonable charges;

(vi) Refusal to pay for higher-cost therapies until it can be shown that a lower-cost therapy is not effective, that are also known as fail-first policies or step therapy protocols;

(vii) Exclusions based on failure to complete a course of treatment;

(viii) Restrictions based on geographic location, facility type, provider specialty, and other criteria that limit the scope or duration of benefits for services provided under the plan or coverage;

(ix) In- and out-of-network geographic limitations;

(x) Standards for providing access to out-of-network providers;

(xi) Limitations on inpatient services for situations where the participant is a threat to self or others;

(xii) Exclusions for court-ordered and involuntary holds;

(xiii) Experimental treatment limitations;  
(xiv) Service coding; and  
(xv) Exclusions for services provided by clinical social workers;

(I) "Predominant" means application to more than one-half (1/2) of such type of limit or requirement;

(J) "Substantially all" means application to at least two-thirds (2/3) of all medical or surgical benefits in a classification; and

(K) "Treatment limitation" includes limits on the frequency of treatment, number of visits, days of coverage, or other similar limits on the scope or duration of treatment.

(2) In addition to any other requirement of law concerning coverage of mental health or mental illness benefits or alcoholism or drug dependency benefits, including, but not limited to, §§ 56-7-2601 and 56-7-2602, any individual or group health benefit plan issued by a health insurance carrier regulated pursuant to this title shall provide coverage for mental health or alcoholism or drug dependency services in compliance with the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) (Pub. L. No. 110-343) found at 42 U.S.C. § 300gg-26 and its implementing regulations found at 45 CFR § 146.136 and 45 CFR § 147.160.

(b) Nothing in subsection (a) prohibits an employee health benefit plan, or a plan issuer offering an individual or group health plan from utilizing managed care practices for the delivery of benefits required under this section, as long as that for any utilization review or benefit determination for the treatment of alcoholism or drug dependence the clinical review criteria is the most recent Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions established by the American Society of Addiction Medicine or other evidence-based clinical guidelines, such as those referenced by the



federal substance abuse and mental health services administration (SAMHSA). No additional criteria other than in this subsection (b) may be used during utilization review or benefit determination for treatment of substance use disorders.

(c) The mandate to provide coverage for mental health services does not apply with respect to a group health plan if the application of the mandate to the plan results in an increase in the cost under the plan of more than one percent (1%). Documentation of the increase in cost must be filed with the department after twelve (12) months of experience. If the commissioner determines that the increase in cost is a result of the requirements of this section, the commissioner or the commissioner's designee shall issue a letter to the issuer of the plan stating that the plan does not have to comply with the mandate set out in this section. The issuer may appeal the letter as final agency action pursuant to the Uniform Administrative Procedures Act, compiled in title 4, chapter 5.

(d) The department of commerce and insurance shall implement and enforce applicable provisions of the federal Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) (Pub. L. No. 110-343), this section, and §§ 56-7-2601 and 56-7-2602, which include:

- (1) Ensuring compliance by individual and group health benefit plans;
- (2) Detecting possible violations of the law by individual and group health benefit plans;
- (3) Accepting, evaluating, and responding to complaints regarding such violations; and
- (4) Maintaining and regularly reviewing for possible parity violations a publicly available consumer complaint log regarding mental health or alcoholism or drug dependency coverage; provided, that individually identifiable information shall be excluded.

(e) Not later than January 31, 2020, the department shall issue a report to the

general assembly and provide an educational presentation to the general assembly.

The report and presentation shall:

(1) Discuss the methodology the department is using to check for compliance with the MHPAEA, and any federal regulations or guidance relating to the compliance and oversight of the MHPAEA, including 45 CFR 146.136;

(2) Discuss the methodology the department uses to check for compliance with this section and §§ 56-7-2601 and 56-7-2602;

(3) Identify market conduct examinations conducted or completed during the preceding twelve-month period regarding compliance with parity in mental health or alcoholism or drug dependency benefits under state and federal laws and summarize the results of such market conduct examinations. Individually identifiable information shall be excluded from the reports consistent with federal privacy protections, including, but not limited to, 42 U.S.C. § 290dd-2 and regulations found at 42 CFR § 2.1 through 42 CFR § 2.67. This discussion shall include:

(A) The number of market conduct examinations initiated and completed;

(B) The benefit classifications examined by each market conduct examination;

(C) The subject matter of each market conduct examination, including quantitative and non-quantitative treatment limitations; and

(D) A summary of the basis for the final decision rendered in each market conduct examination;

(4) Detail any educational or corrective actions the department of commerce and insurance has taken to ensure health benefit plan compliance with this section, the MHPAEA, 42 U.S.C. § 18031(j), and §§ 56-7-2601 and 56-7-2602;

(5) Detail the department's educational approaches relating to informing the public about mental health or alcoholism or drug dependence parity protections under state and federal law; and

(6) Describe how the department examines any provider or consumer complaints related to denials or restrictions for possible violations of this section, the MHPAEA, 42 U.S.C. § 18031(j), and §§ 56-7-2601 and 56-7-2602, including complaints regarding, but not limited to:

(A) Denials of claims for residential treatment or other inpatient treatment on the grounds that such a level of care is not medically necessary;

(B) Claims for residential treatment or other inpatient treatment that were approved but for a fewer number of days than requested;

(C) Denials of claims for residential treatment or other inpatient treatment because the beneficiary had not first attempted outpatient treatment, medication, or a combination of outpatient treatment and medication;

(D) Denials of claims for medications such as buprenorphine or naltrexone on the grounds that they are not medically necessary;

(E) Step therapy requirements imposed before buprenorphine or naltrexone is approved; and

(F) Prior authorization requirements imposed on claims for buprenorphine or naltrexone, including those imposed because of safety risks associated with buprenorphine.

(f) The report issued pursuant to subsection (e) must be written in non-technical, readily understandable language and shall be made available to the public by posting the report on the department's website and by other means as the department finds appropriate. The name and identity of the health insurance carrier must be given

confidential treatment, may not be made public by the commissioner or any other person, and shall not be subject to public inspection pursuant to § 10-7-503.

(g) Benefits under this section shall not be denied for care for confinement provided in a hospital owned or operated by this state that is especially intended for use in the diagnosis, care, and treatment of psychiatric, mental, or nervous disorders.

(h) Nothing in this section applies to accident-only, specified disease, hospital indemnity, medicare supplement, long-term care, or other limited benefit hospital insurance policies.

(i) The commissioner is authorized to promulgate rules to effectuate the purposes of this section. The rules must be promulgated in accordance with the Uniform Administrative Procedures Act.

(j) Nothing in this section shall be construed as requiring the disclosure of any information that would violate 42 U.S.C. § 290dd-2 and regulations found at 42 CFR § 2.1 through 42 CFR § 2.67.

SECTION 2. Tennessee Code Annotated, Title 56, Chapter 7, Part 10, is amended by adding the following as a new section:

(a) Whenever the commissioner performs a market conduct examination of a health insurance carrier that issues a health benefit plan under the jurisdiction of the department of commerce and insurance for compliance with § 56-7-2360, the examination shall include, but not be limited to, the following information:

(1) A description of the process used to develop or select the medical necessity criteria for mental health or alcoholism or drug dependency benefits and the process used to develop or select the medical necessity criteria for medical and surgical benefits;

(2) Identification of all non-quantitative treatment limitations (NQTLs) that are applied to both mental health or alcoholism or drug dependency benefits and medical and surgical benefits; and

(3) The results of any analysis that may have been performed by a health insurance carrier that demonstrates that for the medical necessity criteria described in subdivision (a)(1) and for each NQTL identified in subdivision (a)(2), as written and in operation, the processes, strategies, evidentiary standards, or other factors used to apply the medical necessity criteria and each NQTL to mental health or alcoholism or drug dependency benefits are comparable to, and are applied no more stringently than, the processes, strategies, evidentiary standards, or other factors used to apply the medical necessity criteria and each NQTL, as written and in operation, to medical and surgical benefits. The results of the analysis may:

(A) Identify the factors used to determine that an NQTL will apply to a benefit, including factors that were considered but rejected;

(B) Identify and define the specific evidentiary standards used to define the factors and any other evidentiary standards relied upon in designing each NQTL;

(C) Identify and describe the methods and analyses used, including the results of any relevant analyses, to determine that the processes and strategies used to design each NQTL as written for mental health or alcoholism or drug dependency benefits are comparable to, and no more stringent than, the processes and strategies used to design each NQTL as written for medical and surgical benefits;

(D) Identify and describe the methods and analyses used, including the results of any relevant analyses, to determine that processes and strategies used to apply each NQTL in operation for mental health or alcoholism or drug dependency benefits are comparable to, and no more stringent than, the processes or strategies used to apply each NQTL in operation for medical and surgical benefits;

(E) Disclose the specific findings and conclusions reached by the health insurance carrier that the results of any relevant analyses under this subsection indicate that the health insurance carrier is in compliance with this section and the federal Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) (Pub.L. No. 110-343), and its implementing regulations, including 45 CFR 146.136 and any other applicable regulations; and

(F) Identify any other information necessary to clarify data provided in accordance with this section requested by the commissioner, including information that may be "proprietary" or have "commercial value." Any information submitted that is proprietary shall not be made a public record under title 10, chapter 7.

(b) The health insurance carrier's chief executive officer and chief medical officer shall sign a certification that affirms that the health insurance carrier has completed a comprehensive review of its administrative practices for the prior calendar year for compliance with the necessary provisions of this section and §§ 56-7-2601 and 56-7-2602, and the MHPAEA.

(c) Separate NQTLs that apply to mental health or alcohol or drug dependency benefits but do not apply to medical and surgical benefits within any classification of benefits are not permitted.

SECTION 3. This act shall take effect January 1, 2019, the public welfare requiring it. This act shall apply to policies and contracts entered into or renewed on and after January 1, 2019.